

Goal C: Uphold Health Care Standards

Objective: 03-01 To ensure that health care facilities meet state and federal regulations

Outcome: 01 Percentage of Licensed, Certified, Registered, Permitted, or Documented Professionals Out of Compliance with State Regulations

Short Definition: This outcome measure will report the percentage of licensed, certified, registered, permitted, or documented professionals receiving sanctions for non-compliance with state regulations.

Purpose/Importance: Emergency Medical Services (EMS) personnel are considered out for compliance with state regulations if they receive sanctions of non-compliance from TDH.

Source/Collection of Data: Sanctions result from investigations of certain complaints received by telephone or in writing. Complaints are tracked by profession.

Method of Calculation: Using the reports of the investigation program, the number of persons receiving sanctions is compiled. This number is divided by the total number of EMS personnel certified in the state to determine the rate of compliance for the fiscal year. Totals for each licensed, certified, registered, permitted, or documented profession are tabulated and names of professionals receiving complaints are identified monthly based on the complaints tracking system of fraud, waste and abuse. Using data from the Professional Licensing and Certification Division's (PLCD) complaints tracking system and the EMS program's investigation report the outcome is calculated by dividing the number of licensed, registered, certified, permitted, and documented professionals out of compliance by the total number of licensed, certified, registered, permitted, or documented professionals tracked by the PLCD and EMS program for the fiscal year.

Data Limitations: None.

Calculation Type: Non-cumulative

New Measure: No

Desired Performance: Lower than target

Cross Ref To Prior Biennium: AGY 501 076 - R 03 - 01 – 01

Outcome: 02 Percentage of Licensed/Certified Acute Health Care Facilities (AHCF) Meeting State/Federal Regulations at Survey

Short Definition: With the outcome measure of percentage of licensed/certified acute health care facilities (AHCF) meeting state/federal regulation at survey, the comparison will be made on a yearly basis between the number of acute care facility surveys conducted and the number of those surveys which found the facilities to be in compliance with state/federal regulations.

Purpose/Importance: The goal is to demonstrate an increase in the compliance rate being an indicator of improved health care delivery to the citizens of Texas by TDH regulated health care facilities.

Source/Collection of Data: The number of compliance surveys is provided through manual computation. The facilities found to be out of compliance is maintained in a database file in an automated computer system, the Integrated System, of the enforcement activity section.

Method of Calculation: The percentage is calculated by dividing the number of acute care facilities found out of compliance with state and federal regulations during surveys by the total number of compliance surveys conducted. This number is subtracted from 1 and then multiplied by 100%.

Data Limitations: The number of compliance surveys is provided through manual computation.

Calculation Type: Non-cumulative

New Measure: No

Desired Performance: Higher than target

Cross Reference To Prior Biennium: AGY 501 076 - R 03 - 01 – 02

Strategy: 03-01-01 Health Care Standards

Efficiency: 01 Average Number Of Days For Professional Accreditation

Short Definition: This efficiency measure reflects the average number of days required to process an application or renewal for either a license, registration, certification, permit, or documentation in accordance with the applicable statute and/or rules for a given period of the state fiscal year.

Purpose/Importance: This efficiency measure reflects the average number of days required to process an application or renewal for either a license, registration, certification, permit, or documentation in accordance with the applicable statute and/or rules for a given period of the state fiscal year.

Source/Collection of Data: Automated systems providing information gathered from applications, renewals, and/or examinations for licenses, registrations, certificates, permits, or documentation filed with the TDH.

Method of Calculation: The calculation is based on the total number of days to process all applications and renewals (numerator) divided by the total number of applications and renewals received (denominator).

Data Limitations: None

Calculation Type: Non-cumulative

New Measure: No

Desired Performance: Lower than target

Cross Reference To Prior Biennium: AGY 501 076 - R 03 - 01 - 01 EF 01

Output: 01 Number Health Care Professionals Licensed, Permitted, Certified, Registered, or Documented

Short Definition: This output measure reflects the cumulative total (both initial and renewals) of individuals licensed, permitted, certified, registered, documented, or placed on a registry.

Purpose/Importance: This output measure reflects the cumulative total (both initial and renewals) of individuals licensed, permitted, certified, registered, documented, or placed on a registry.

Source/Collection of Data: Automated systems providing information from TDH databases of health care professionals.

Method of Calculation: This output measure reflects the cumulative total (both initial and renewals) of individuals licensed, permitted, certified, registered, documented, or placed on a registry.

Data Limitations: None

Calculation Type: Cumulative

New Measure: No

Desired Performance: Higher than target

Cross Reference To Prior Biennium: AGY 501 076 - R 03 - 01 - 01 OP 01

Output: 02 Number of Complaint Investigations Conducted

Short Definition: The number of complaint investigations conducted is defined as the total number of investigations in acute care health facilities performed by staff for a given period of the state fiscal year, which are documented by an appropriate investigative report. The calculations are limited to the complaint investigations conducted on-site at facilities.

Purpose/Importance: A complaint investigation is conducted based on allegations of potential violations of state and federal regulations. Each facility type has specific regulations. The investigative report, completed by the surveyor who performs the investigation, shows the allegation(s) considered; the investigative process; the area(s) found to be deficient in meeting any relevant regulations; and the surveyor's finding(s) relating to the validity of the allegation(s). Primary responsibility for conducting complaint investigations is delegated by the director to zone office personnel.

Source/Collection of Data: Currently there are five (5) zone offices in the state, each responsible for the survey activity of a distinct geographical area of the state. Professional Licensing & Certification Division reports the number of complaint investigations conducted on professionals licensed, permitted, certified, registered, or documented. Activities are tracked by using a computerized tracking system for complaints. Bureau of Emergency Management reports the number of EMS complaint investigations conducted. Investigations are initiated upon notification of possible violations of state laws or rules by EMS personnel or providers.

Method of Calculation: The number of complaint investigations conducted is defined as the total number of investigations in acute care health facilities performed by staff for a given period of the state fiscal year, which are documented by an appropriate investigative report. The calculations are limited to the complaint investigations conducted on-site at facilities. The data are computed either manually or from computerized database information from survey documents submitted by staff. Using reports and complaint databases of the Quality Improvement Team, the number of complaint investigations conducted is compiled.

Data Limitations: The data are computed either manually or from computerized database information from survey documents submitted by staff.

Calculation Type: Cumulative

New Measure: No

Desired Performance: Lower than target

Cross Reference To Prior Biennium: AGY 501 076 - R 03 - 01 - 01 OP 02

Output: 03 Number of Facility Surveys Conducted

Short Definition: This measure is defined as the number of surveys pertaining to the quality of health care delivery under state and federal regulations conducted by staff at acute care health facilities for a given period of the state fiscal year, excluding complaint investigations.

Purpose/Importance: This measure is defined as the number of surveys pertaining to the quality of health care delivery under state and federal regulations conducted by staff at acute care health facilities for a given period of the state fiscal year, excluding complaint investigations.

Source/Collection of Data: Within the division, the primary responsibility for conducting surveys is delegated by the director to zone office personnel. Currently there are five (5) zone offices in the state, each responsible for the survey activity of a distinct geographical area of the state. Each zone office has a program administrator who oversees the office. Each survey is documented in a report provided by the surveyor(s) at the completion of the survey process.

Method of Calculation: This measure is defined as the number of surveys pertaining to the quality of health care delivery under state and federal regulations conducted by staff at acute care health facilities for a given period of the state fiscal year, excluding complaint investigations.

Data Limitations: The data are computed either manually or from computerized database information from survey documents submitted by staff.

Calculation Type: Cumulative

New Measure: No

Desired Performance: Higher than target

Cross Reference To Prior Biennium: AGY 501 076 - R 03 - 01 - 01 OP 03

Output: 04 Number of Licenses Issued For Health Care Facilities

Short Definition: The Health Facility Licensing and Compliance Division licenses general & special hospitals, private mental hospitals and crisis stabilization units, ambulatory surgical centers, birthing centers, special care facilities, end stage renal disease facilities, and abortion facilities. The number of licenses issued reflects the number of facilities newly licensed during the specified timeframe, the number of facilities renewing their annual license, and the number of facilities changing ownership (i.e., facilities bought and sold) for a given period of the state fiscal year.

Purpose/Importance: These numbers can be used for analyzing trends in the health care industry and in forecasting future trends, growths, and/or declines in the health care industry as well as showing the significant workload of the division.

Source/Collection of Data: After a receipt of a complete application and the licensing fee and upon completion of the application review, a license is issued to the facility. A license is issued for approved initial applications, renewal applications, and change of ownership for all facilities. For general & special hospitals, private mental hospitals, crisis stabilization units, and special care facilities a license is also issued for bed increases/decreases, and name and/or address changes. For abortion facilities, a license is also issued for address changes. A serial number is assigned for each license issued.

Method of Calculation: The counts of licenses issued are obtained both manually by counting serial numbers and electronically where automation available.

Data Limitations: This measure may be less than the actual workload due to applications received and reviewed where no license is issued (for various reasons). This measure does not reflect the number of licensed facilities at any given time (i.e., a count of licensed facilities) due to the fact that while initial licenses are being issued to new facilities, a number of facilities are closing or undergoing a change of ownership.

Calculation Type: Non-cumulative

New Measure: No

Desired Performance: Higher than target

Cross Reference To Prior Biennium: AGY 501 076 - R 03 - 01 - 01 OP 05

Objective: 02 Respond to Laboratory Requests and Complaints

Outcome: 01 Percentage of Timely Completion of Laboratory Tests

Short Definition: The outcome measure is completion of 95% of the high volume tests within established turnaround times. High volume tests are defined as tests conducted on more than 10,000 specimens per year. The turnaround time includes the pre-analytical, analytical, and post-analytical procedural steps that are taken from the time a sample arrives at the laboratory until the test result is validated and released for reporting.

Purpose/Importance: This performance measure demonstrates the efficiency and reliability of laboratory operations in prompt completion of testing procedures and is an important measure of customer service. Test results are used to determine client health status or to indicate environmental quality. Prompt completion of testing procedures allows the Bureau of Laboratories' customers to reach conclusions about client health status or environmental quality in a timely manner.

Source/Collection Of Data: The Bureau of Laboratories' information management systems include specimen tracking features which log the date and time a sample is received and the date and time the analysis is completed. These dates will be used to determine turnaround time.

Method Of Calculation: In most cases, these data are captured by the Bureau of Laboratories' information management systems and the calculations of turnaround times are completed during preparation of management reports. In the cases where computer data are not available, staff will manually determine the turnaround time. The turnaround time for each test will be calculated by subtracting the received date from the report date and will be compared with the established target turnaround time for the test procedure. The performance measure will be the percentage of test results that are completed within the target turnaround times.

Data Limitations: there is no widely accepted standard for sample turnaround time because of the diversity of test protocols from laboratory to laboratory. However, the Bureau of Laboratories has established reasonable turnaround times for its testing procedures. These turnaround times are based on procedure complexity and the time required to complete the procedure using good laboratory practices. The performance measure will include the high volume procedures done in each of the three testing areas: Biochemistry and Genetics, Environmental Sciences, and Microbiology.

Calculation Type: The measure is non-cumulative.

New Measure: Yes

Desired Performance: Higher than target

Cross Reference To Prior Biennium: None

Strategy: 03-02-01 Laboratory

Efficiency: 01 Cost Per Work Time Unit

Short Definition: The total number of Work Time Units (WTU) produced is a measurement of productivity.

Purpose/Importance: will measure economy and efficiency in the form of Cost/WTU. This can be used as a projection with estimated numbers, or as a calculation of actual efficiency at the close of a year.

Source/Collection of Data: The data for this measure is obtained from two sources: 1) annual budgeted expenditures for the Bureau of Laboratories as reported by the Texas Department of Health Bureau of Financial Services and 2) the total WTUs.

Method of Calculation: Total annual budgeted expenditures divided by the total WTU's.

Data Limitations: Calculations made during the year will show wide swings due to early purchases of supplies and materials which are delivered throughout the year.

Calculation Type: Non-cumulative

New Measure: No

Desired Performance: Lower than target

Cross Reference To Prior Biennium: AGY 501 076 - R 03 - 02 - 01 EF 01

Output: 01 Work time units produced

Short Definition: Work time unit equals the number of minutes of actual analytical (testing) time it takes to produce a reportable result.

Purpose/Importance: Measures work time units produced by laboratory.

Source/Collection of Data: The Bureau of Laboratories established a schedule of standard Work Time Units (WTU) for each procedure performed by the Bureau, and WTUs serve as a standard measure of output. The output for each procedure is the number of procedures completed multiplied by the standard WTU for that procedure. The output for the Bureau is the sum of the outputs of all the individual procedures completed. The Bureau of Laboratories accounts receivable system accumulates the number of each individual procedure completed. A spreadsheet is used to compute the output measure for the Bureau.

Method of Calculation: The calculation is made by multiplying the actual number of reportable results times the work time unit assigned to the associated laboratory test.

Data Limitations: None

Calculation Type: Cumulative

New Measure: No

Desired Performance: Higher than target

Cross Reference To Prior Biennium: AGY 501 076 - R 03 - 02 - 01 OP 01